



VENDOR APPLICATION

2020

Wilmington, MA - Shriners Auditorium | Marlborough, MA - Royal Plaza |

Size	Show
10 x 10	\$295 / show
10 x 20	\$505 / show
10 x 30	\$655 / show
10 x 40	\$715 / show
Bulk Space (500+ sq. ft.)	\$1.55/sq. ft. / show



Fill out to calculate your space and service costs.

Show	Front	X	Depth	=	Sq. Ft.	@	Bulk \$ per Sq. Ft.	or	Cost of Space	Corner	Electricity	Weekend	Additional	Total Per Show Cost
										Add \$35 per Corner	As Indicated (check if YES)	Parking Pass	Weekend Wristbands	
Wilmington February 8 and 9		X		=	@	= \$				qty. <input type="checkbox"/> x \$35.00 Total \$	<input type="checkbox"/> \$95.00	No Charge	qty. <input type="checkbox"/> x \$20.00 Total \$	
Marlborough February 22 and 23		X		=	@	= \$				qty. <input type="checkbox"/> x \$35.00 Total \$	<input type="checkbox"/> \$95.00	No Charge	qty. <input type="checkbox"/> x \$20.00 Total \$	

FUTURE SHOW

Company	Contact	TOTAL Cost of All Shows	
Address			25% Deposit with Sent Application
City, State, Zip			Balance Due 30 days before shows start

Selling / Displaying (entry required). Please be specific.

e-Mail or Mail this Application to:

Paragon Shows LLC
P.O. 1209
Andover, MA 01810
978-688-8888 Phone
LouAnn@ParagonShows.com

Billing Terms: The deposit is applied to the rental fee if the application is accepted. The application fee will be returned if the application is rejected for any reason. If participating in multiple shows, your deposit guarantees your spot at each show, but it is credited to the final show attended. **Make checks payable to Paragon Shows LLC ... or ... charge it to your credit card - MasterCard, Visa, or American Express.** We will apply the deposit to your credit card when we receive your Vendor Contract. The balance will be charged 4 weeks prior to the show.

Card Type	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express	Number	Security Code	Expiration Date	Authorization: I authorize Paragon Shows LLC to charge my credit card according to the Billing Terms above. If using a credit card, this application can be sent via E-mail to: LouAnn@Paragonshows.com . I have read the Rules and Regulations and agree to abide by them.
Name On Credit Card					
Billing Address - if different from above					Authorized Signature and Date